

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	2/2/01
FORMALITY REVIEW	YG	956	02/26/01
RESPONSE FORMALITY REVIEW	SS	973	06-15-01

INDEX OF CLAIMS

ST AVAILABLE COPY

Rejected  
Allowed  
- (Through numeral)... Canceled  
÷ ..... Restricted

N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/01
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11	✓	✓	7/02
12	✓	✓	1/03
13	✓	✓	1/03
14	✓	✓	1/03
15	✓	✓	1/03
16	✓	✓	1/03
17			
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21			
22	✓	✓	1/03
23	✓	✓	1/03
24	✓	✓	1/03
25	✓	✓	1/03
26	✓	✓	1/03
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29	✓	✓	1/03
30	✓	✓	1/03
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37	✓	✓	1/03
38	✓	✓	1/03
39	✓	✓	1/03
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44	✓	✓	1/03
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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